

## CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Sabrina Cohen  
 Name

(2) 1800 Sunset Harbour Drive; Apt 2406C  
 Address (number and street)

Miami Beach, FL 33139  
 City, State, Zip Code

**OFFICE USE ONLY**  
**ONLINE SUBMISSION**  
 [1287605]

Submitted on:  
 11/10/2022 16:57:01 (eastern)

Check here if address has changed (3) ID Number: 95

(4) Check appropriate box(es):

Candidate Office Sought: Commissioner Group II

Political Committee (PC)

Electioneering Communications Org. (ECO)  Check here if PC or ECO has disbanded

Party Executive Committee (PTY)  Check here if PTY has disbanded

Independent Expenditure (IE) (also covers an individual making electioneering communications)  Check here if no other IE or EC reports will be filed

### (5) Report Identifiers

Cover Period: From 11 / 4 / 2022 To 11 / 4 / 2022 Report Type: R1

Original  Amendment  Special Election Report

**(6) Contributions This Report**

Cash & Checks \$        ,        , 0 . 00

Loans \$        ,        , 0 . 00

Total Monetary \$        ,        , 0 . 00

In-Kind \$        ,        , 0 . 00

**(7) Expenditures This Report**

Monetary Expenditures \$        , 4 , 035 . 09

Transfers to Office Account \$        ,        , 0 . 00

Total Monetary \$        , 4 , 035 . 09

**(8) Other Distributions**  
 \$        ,        , 0 . 00

**(9) TOTAL Monetary Contributions To Date**  
 \$        , 103 , 334 . 00

**(10) TOTAL Monetary Expenditures To Date**  
 \$        , 92 , 295 . 68

### (11) Certification

**It is a first degree misdemeanor for any person to falsify a public record (ss. 839.13, F.S.)**

I certify that I have examined this report and it is true, correct, and complete:

(Type name) \_\_\_\_\_

Individual (only for IE or electioneering comm.)  Treasurer  Deputy Treasurer

X \_\_\_\_\_  
 Signature

(Type name) \_\_\_\_\_

Candidate  Chairperson (only for PC and PTY)

X \_\_\_\_\_  
 Signature

## CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Sabrina Cohen (2) I.D. Number 95

(3) Cover Period 11/4/2022 through 11/4/2022 (4) Page 1 of 0

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor Type Occupation		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
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**CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES**

(1) Name Sabrina Cohen

(2) I.D. Number 95

(3) Cover Period 11/4/2022 through 11/4/2022

(4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Purpose (add office sought if contribution to a candidate)	(9) Expenditure Type	(10) Amendment	(11) Amount
(6) Sequence Number					
11/4/2022 / /	WIN Canvass LLC , 1742 W Flagler Miami, FL 33135	outreach	MO		\$3,000.00
1					
11/4/2022 / /	Kripalani, Jasmine 7990 Crespi Blvd Miami Beach, FL 33141	reimbursement for food for events	RM		\$1,035.09
2					
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